

UNOFFICIAL COPY

STATE OF ILLINOIS }
DEPARTMENT OF }
HEALTHCARE AND FAMILY SERVICES }
County of Cook }



Notice Of Claim Upon Real Estate
By Virtue of [] 305 ILCS 5/3-9
 [X] 305 ILCS 5/5-13

Doc# 1628842051 Fee \$40.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 10/14/2016 11:30 AM Pg: 1 of 1

FOR: [X] MEDICAL ASSISTANCE
 [] BLIND ASSISTANCE
 [] AGED ASSISTANCE
 [] DISABILITY ASSISTANCE

NOTICE IS HEREBY GIVEN:

That the Illinois Department of Healthcare and Family Services asserts a claim upon the premises legally described as:

Lot 31 in Block 2 in Noonan's West Chicago Avenue Subdivision being a Subdivision in Section 3, Township 39 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 817 N. Kildare Chicago, Illinois 60651
P.I.N. 16-03-426-017-0000

THAT the assistance as checked above was awarded to: **CASE ID#: 93-237-000FC1586**
CASE NAME: KATHYLEAN LEONARD **COUNTY OF RESIDENCE: 200**


from 03/24/2016 through 03/31/2016; inclusive, in the aggregate amount of \$917.28.

THAT no part of said Assistance has been repaid to the Claimant, either by the recipient, their heirs, devisees, legatees, or by any other person(s) on behalf of the estate.

THAT the amount claimant demands for said Assistance is \$917.28, the said amount being now due and owing to the claimant.

THAT said \$917.28, is hereby asserted by the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES as a claim upon the described real estate.

ILLINOIS DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES
Claimant

By 
Authorized Representative

STATE OF ILLINOIS
COUNTY OF COOK

Healthcare and Family Services
} Collections/Technical Recovery
} Prepared by/Contact/Return to: 312-793-3529
} 401 S. Clinton - 5th Floor
} Chicago, IL 60607-3800

ESTEL HARDIMAN, being first duly sworn upon oath, deposes and says that they are an authorized agent and representative of the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES, in and for the County of Cook, and claimant in the foregoing claim, that he has read the same, knows the contents thereof, and believes the same to be true.


Notary Public

Subscribed and sworn to before me this
6 day of OCTOBER, A.D., 2016.
My commission expires 6.21.20.

HFS 289 (R-4-99)

